

GEORGIA DEPARTMENT OF HUMAN RESOURCES Food Service Establishment Inspection Report

Establishment Name: Mangarelli's Pizzeria Address: 749 W Lanier Ave, Suite 134

City: Fayetteville Time In: 2:15 pm Time Out: 3:20 pm

Inspection Date: 12/11/2009 CFSM: Post by 2/10

Purpose of Inspection: Routine: ● Follow-Up: O Complaint: O

Preliminary: O Other: O **Risk Type:** 1 O 2 ● 3 O

'Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health Interventions

are control measures to prevent illness or injury.

Permit#: 2-76408 'Good Retail Practices are preventive measures to control the introduction of pathogens,

chemicals, and physical objects into foods

CURRENT SCORE

CURRENT GRADE

SCORING AND GRADING: A=90-100 B=80-89 C=70-79 U<69

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Last Score

95

Prior Score

99

Α

Α

Grade

Date

6/23/09

1/7/09

(Mark designated compliance status (IN, OUT, NA, or NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.) IN=in compliance OUT=not in compliance NO=not observed NA=not applicable COS=corrected on-site during inspection R=repeat (violation of the same code provision)=2 points per subcategory

	Compliance Status							
1	IN	OUT	OUT NA NO Supervision				ints	
	•	0			1-2. Person in charge present, demonstrates knowledge, and performs duties	0	0	
2	IN	OUT	NA	NO	Employee Health, Good Hygenic Practices, Preventing Contamination by Hands-Subcategory 1	9 points		
	•	0			2-1A. Proper use of restriction & exclusion	0	0	
	•	0		0	2-1B. Hands clean and properly washed	0	0	
	•	0	0	0	2-1C. No bare hand contact with ready-to-eat foods or approved alternate method properly followed	0	0	
					Employee Health, Good Hygenic Practices -Subcategory 2	4 pc	ints	
	•	0			2-2A. Management awareness; policy present; reporting	0	0	
	0	•		0	2-2B. Proper eating, tasting, drinking, or tobacco use	•	0	
	•	0		0	2-2C. No discharge from eyes, nose, and mouth	0	0	
	•	0			2-2D. Adequate handwashing facilities supplied & accessable	0	0	
3	IN	OUT	NA	NO	Approved Source		ints	
	•	0			3-1A. Food obtained from approved source; parasite destruction	0	0	
	0	0	0	•	3-1B. Food received at proper temperature	0	0	
	•	0			3-1C. Food in good condition, safe, and unadulterated	0	0	
4	IN	OUT NA NO Protection from Contamination-Subcategory 1		9 po	ints			
	•	0	0		4-1A. Food separated and protected	0	0	
	•	0			4-1B. Proper disposition of contaminated food; returned food or unused food not re-served	0	0	
					Protection from Contamination-Subcategory 2	4 pc	ints	
	•	0	0		4-2A. Food stored covered	0	0	
	•	0	0		4-2B. Food-contact surfaces: cleaned & sanitized	0	0	
GOOD RETA								

	Compliance Status							
5	IN	OUT	NA	NO	Cooking and Reheating of Potentially Hazardous Foods, Consumer Advisory-Subcategory 1	9 pc	oints	
	•	0	0	0	5-1A. Proper cooking time and temperatures	0	0	
	•	0	0	0	5-1B. Proper reheating procedures for hot holding	0	0	
					Consumer Advisory-Subcategory 2			
	O O • 5-2. Consumer advisory provided for raw undercooked foods		5-2. Consumer advisory provided for raw and undercooked foods	0	0			
6	IN	OUT	NA	NO	Holding of Potentially Hazardous Foods, Date Marking Potentially Hazardous Food-Subcategory 1	9 points		
	•	0	0		6-1A. Proper cold holding temperatures	0	0	
	•	0	0	0	6-1B. Proper hot holding temperatures	0	0	
	•	0	0	0	6-1C. Proper cooling time and temperature	0	0	
	0	0	0	•	6-1D. Time as a public health control: procedures and records	0	0	
					Date Marking-Subcategory 2	4 po	ints	
	•	0	0	0	6-2. Proper date marking and disposition	0	0	
7	IN	OUT	NA	NO	Highly Susceptable Populations	9 po	ints	
	0	0	•		7-1. Pasteurized foods used; profibited foods not offered	0	0	
8	IN	OUT	NA	NO	Chemicals	4 points		
	•	0	0		8-2A. Food additives: approved and properly used	0	0	
	•	8-2B. Toxic substances properly identified, stored, used		0	0			
9	IN	OUT	NA	NO	Conformance with Approved Procedures	4 points		
	0	0	•		9-2. Compliance with variance, specialized process and HACCP plan	0	0	

IL PRACTICES

(Mark the numbered item OUT, if not in compliance. For items marked OUT, mark COS or R

Compliance Status						
10	OUT	Safe Food and Water, Food Identification				
	0	10A. Pasteurized eggs used where required				
	0	10B. Water and ice from approved source				
	0	10C. Variance obtained for specialized processing methods				
	0	10D. Food properly labeled; original container; required records available; shellstock tags	0	0		
11	OUT Food Temperature Control					
	0	11A. Proper cooling methods used; adequate equipment for temperature control $$	0	0		
	0	11B. Plant food properly cooked for hot holding	0	0		
	0	11C. Approved thawing methods used		0		
	0	11D. Thermometers provided and accurate	0	0		
12	OUT	Prevention of Food Contamination	3 pc	ints		
	•	12A. Contamination prevented during food preparation, storage, display	•	0		
	0	12B. Personal cleanliness	0	0		
	0	12C. Wiping cloths: properly used and stored	0	0		
	0	12D. Washing fruits and vegetables	0	0		
13	OUT	Postings and Compliance with Clean Air Act				
	O 13A. Posted: Permit/Inspection/Choking Poster/Handwashing		0	ints O		
	O 13B. Compliance with Georgia Smoke Free Air Act		0	0		

for each item as applicable. R=Repeat (violation of the same code provision) = 1 point per								
L	Co	Compliance Status						
	14	OUT	Proper Use of Utensils	1 pc	oint			
		0	14A. In-use utensils: Properly stored	0	0			
		O 14B. Utensils, equipment and linens: properly stored, dried, hand						
		0	14C. Single-use/single-service articles: properly stored, used	0	0			
ſ		0	14D. Gloves used properly	0	0			
	15	OUT	Utensils, Equipment and Vending	1 point				
		0	$15 A. \ \ Food \ \& \ nonfood-contact \ surfaces \ cleanable, properly \ designed, \ constructed, \ used$	0	0			
		0	15B. Warewashing facilities: installed, maintained, used; test strips	0	0			
		0	15C. Nonfood-contact surfaces clean.	0	0			
	16	OUT	Water, Plumbing and Waste					
		0	16A. Hot and cold water available; adequate pressure	0	0			
		0	16B. Plumbing installed; proper backflow devices	0	0			
		0	16C. Sewage and waste water properly disposed	0	0			
	17	OUT	Physical Facilities					
		0	17A. Toilet facilities: properly constructed, supplied, cleaned	0	0			
		•	17B. Garbage/refuse properly disposed; facilities maintained	0	0			
		•	17C. Physical facilities installed, maintained, and clean	0	0			
		0	17D. Adequate ventilation and lighting; designated areas used	0	0			
	18	OUT	Pest and Animal Control	3 points				
		0	18. Insects, rodents, and animals not present	0	0			

Turned (Circulation)	Follow-up: Yes O No● Follow-u	p Date:
Person in Charge (Signature): (Print)		PM
		Date: 12/11/2009 2:15:00

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Violations cited in this report must be corrected within the time frames specified below, or as stated in the Georgia Department of Human Resources Rules and Regulations Food Service Chapter 290-5-14, Rule .10 subsection (2)(i) and (j)										
Establishr Mangarelli's		Perr 2-76	408		Date InspectionDate2					
Address 749 W Lani	er Ave, Suite 134		City/State Fayetteville, GA 302	:14	Zip Code 30214					
			TEMPERATURE OBSERV	/ATI	ONS					
	Item/Location	Temp	Item/Location		Temp	Item/	/Location		Temp	
WIC Sausa	ge cooling 1 hr	50	Pizza Make line pepperoni		38					
WIC Pasta		40	" sausage		37					
WIC Chees	e	40	" interior		37					
Meat Balls	HH .	160	WIF		12					
Sauce HH		148								
Makeline su	ıb.salad interior	38	DW chlorine		50- 100ppm					
" tomatoes		40	3 comp sink quat		not set up					
" cheese		39								
Item Number			OBSERVATIONS AND COR	REC	CTIVE ACTION	IS				
\$12 \$17	below work station. Open 12-A Do not store contai Containers of food place	ners of ed on she	food on, or within 6", of following in WAlk in units.	loor	. Raise lowest	shelf in wa	alk in co	poler.		
Person in	Person in Charge (Signature) Date									
	Inspector (Signature) Date 12/11/2009 2:15:00 PM									

Food Service Establishment Inspection Report Addendum

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Establishment Mangarelli's Pizzeria	Permit 2-76408	Date InspectionDate3					
Address 749 W Lanier Ave, Suite 134	City/State Fayetteville, GA 30214	Zip Code 30214					
Item ODCEDVATIONS A							
There	ND CORRECTIVE ACTIONS ND CORRECTIVE ACTIONS	30214					
Person in Charge (Signature)		Date Date					
Inspector (Signature)		Date 12/11/2009 2:15:00 PM					